UW Medicine

PRIMARY CARE

Four-Month-Old Well Child Visit

Baby's Name	Baby's Age	_Date
Person completing the form	_Relationship to the pa	tient

Has your child had any illnesses, hospitalizations, or surgeries since last visit here? (YES) (NO)

Nutrition:	Yes	No
Is your baby feeding well?	()	()
Is your baby breastfed?	()	()
If yes, how often?		
Is your baby formula fed? If yes:	()	()
What formula?		
How many ounces per feeding?		
How often?		
Are you giving your baby vitamins?	()	()
Are you offering anything else to your baby to eat or drink?	()	()
Family and Social History:	Yes	No
Are there any major illnesses in the family that we are not already aware of?	()	()
Are there any major stressors in the family (illness, moves, death, separation)?	()	()
Preventative Health/Risk Factors:	Yes	No
Does your child sleep only on his/her back?	()	()
Does your child sleep in his/her own bassinet or crib?	()	()
Does your child always ride in a car seat, in the back seat, facing backwards?	()	()
Do you, anyone who cares for you child, or anyone in your home smoke?	()	()
La construction de la constructi	()	()

Do you, anyone who cares for you child, or anyone in your nome smoke?	()	()
Is your home free of infant walkers?	()	()
Is your home free of small toys that are choking hazards?	()	()
Is your water heater set to less than 120 degrees?	()	()

Behavioral/Mental Health:	Yes	No
Does your child have a regular sleep routine?	()	()
Do you have any concerns about how your child is learning, developing and behaving?	()	()
Are you interested in enrolling your child in daycare?	()	()
 If yes, do you need assistance to find a suitable program? 	()	()

Developmental Surveillance:

Social/Emotional Development:	Yes	No
Can calm down on own?	()	()
Smiles to get your attention?	()	()
Wants you to play?	()	()

Communicative Development:	Yes	No
Babbles?	()	()

Cognitive Development:	Yes	No
Likes to cuddle?	()	()
Lets you know when happy or not?	()	()
Physical Development:	Yes	No
Pulls to sit with no head lag?	()	()
Bears weight on legs?	()	()
Pushes chest up to elbows?	()	()
Good head control?	()	()
Moves both sides equally?	()	()
Begins to roll and reach for objects?	()	()